

**GOVERNMENT OF ANDHRA PRADESH**  
**ABSTRACT**

**Strengthening In-Patient Services in the Government Hospitals – Streamlined Diet Management System and Enhanced Diet Charges - Orders - Issued**

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**HEALTH MEDICAL & FAMILY WELFARE (M.I.) DEPARTMENT**

G.O.Ms. No. 146

Dated: 07.06.2011

Read the

following:-

1. G.O.Ms.No.42, HM&FW Dept.Dt.22.02.2006
2. From the DME A.P. Hyderabad Lr.Rc.No.22961/SP/2009, dated 28.03.2009
3. Commissioner, APVVP, Hyderabad, Lr.Rc.No.2160/HEC.B/2005, dated 18.06.2009.
4. Commissioner, AYUSH, A.P. Hyderabad, Lr.No.6704/BG.1/2010, dated 06.07.2010.

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**ORDER:**

1. Provision of balanced nutrition to inpatients during their stay in the Government Hospitals has been an integral part of medical treatment for several years. In the reference first read above, daily diet charges per patient was fixed at Rupees Twenty (Rs.20) for the general category and Rupees Twenty-Eight (Rs 28) for those with chronic diseases requiring special diet. In the references second and fourth read above, the Director of Medical Education, Commissioner APVVP and Commissioner AYUSH have stated that the diet provided to the inpatients has been falling short of expected quality due to inflationary pressures and have requested for increase in the calorific content of the diet along with proportionate improvement in the protein and other nutrient content.

2. The Government, after careful examination of the matter, has decided to streamline the management system for delivery of nutritious food to inpatients in all Government hospitals and health centres under the control of Health, Medical and Family Welfare Department. Accordingly, the Government orders that balanced and nutritious diet be provided to every general inpatient admitted to the government hospitals, health centres and health facilities at a floor price of Rupees thirty six (Rs 36) per day; and those requiring specially fortified diet (patients under treatment for Tuberculosis, Psychosis, serious nutritional deficiencies, etc) will be supplied at a cost of Rupees fifty one (Rs 51) per day. The calorific norms, the quality and quantity of food items to be supplied to different categories of patients is summarized in the Annexure to this order. The revised tariff will be effective 1 August 2011.

**DISTRICT DIET MANAGEMENT COMMITTEE (DDMC)**

3. The Government hereby order the establishment of District Diet Management Committee (DDMC) in every district for the overall management and monitoring of diet supplied in all government hospitals in the district, with the following members:

District Collector	Chairman
Joint Collector	Vice-Chairman
Chief Dietician/Dietician	Member
Food Inspector	Member
District Medical & Health Officer	Member
NGOs/Voluntary Organizations	Member
	(Nominated by Collector)
Most Senior Physician & Paediatrician in the district	Members
Resident Medical Officer of Teaching / District Hospital	Member
District Coordinator for Hospital Services	Member – Convenor
Superintendent of Teaching / District Hospital	Co-Convenor

P.T.O.

4. The DDMC shall be responsible for determining the quality of diet supplied to the hospital inpatients, procurement of the most competitive diet provider and for monitoring the quality of food supplied to the inpatients. The Superintendent of the district / teaching hospital shall be responsible for executing and administering the diet contract. The DCHS and the concerned Senior Public Health Officer (SPHO) shall be responsible for the administration of diet contract pertaining to the Area Hospitals and the Health Centres (CHC / PHC) within the Community Health and Nutrition Cluster (CHNC) respectively.

5. The government orders that the new diet contract in all government hospitals shall be effective 1 August 2011 in accordance with this Order. In this direction, the government orders that diet for the inpatients in all hospitals across the state shall be procured through a transparent and competitive process duly treating the teaching and district hospitals as distinct units; and each of the Area Hospital and CHCs as distinct units. In case of PHCs conducting deliveries, the diet will be supplied either through a local NGO and if such an arrangement is not feasible, the diet charges will be disbursed through a cheque to the patient along with Janani Suraksha Yojana (JSY) by the Medical Officer within 24 hours of the delivery of child.

#### **PROCUREMENT OF DIET SERVICE PROVIDER (DSP)**

6. The DDMC will conduct competitive bidding for procuring the services of a Diet Service Provider (DSP). The bidding will involve two envelope process, i.e., technical and financial bidding in sequential order. The technical parameters, which inter alia include: a) experience in food supply beyond government hospitals – i.e., hostels, schools, private hospitals, private entities, etc.; b) track record in hospitality business, including catering services; c) availability of modern kitchen and diet supply infrastructure; d) technical expertise in nutrition, as demonstrated by innovative ideas for hospital diet supply and full-time employment of technical experts, including but not limited to dietitians etc; e) transparency in transactions, as demonstrated by the filing of IT returns for the past five years, non-litigant history, especially with the government, etc., carry 70% weightage and the price bid will have 30% weight. Only those obtaining more than 50 of the 70 points for the technical bid will be qualified for the second round.

7. The financial bid will be for the management fee for diet supply to the inpatients. The maximum permissible fee is Rupees four (Rs 4) per inpatient-day for the ordinary diet and Rupees five (Rs 5) per inpatient day for the special diet. The bidder offering the most competitive price will get 30 points, with the others proportionately lesser points. The successful bidder will have to provide a performance guarantee equivalent to 10% of the annual value of the contract in the form of a Bank Guarantee. The period of validity of the contract will be for two years, subject to termination without notice for failure to fulfil contractual obligations.

#### **STATE LEVEL COMMITTEE**

8. The Government hereby order for the establishment of a state level committee under the chairmanship of Commissioner of Health and Family Welfare with Director of Public Health, Director of Medical Education, APVVP Commissioner, AYUSH Commissioner as members and NRHM Mission Director as the member-secretary. This committee will standardise the bid documents, contract documents, contract conditions, etc., and will oversee the procurement and contracting of new diet contractor by 20 July 2011. This committee will also monitor the implementation of diet supplied to all hospitals across the state and take appropriate remedial measures.

#### **HOSPITAL DIET MANAGEMENT COMMITTEE (HDMC)**

9. In addition, the Government orders for the establishment of Hospital Diet Management Committee (HDMC) in every hospital with the Superintendent as Chairman; Dietician as the Convener; and the Resident Medical Officer (RMO), senior-most physician, paediatrician, and obstetrician, senior most Nurse, a representative of the junior doctors and a representative of the inpatients – on the day of the HDMC meeting - as members. The HDMC will be convened by the RMO and the diet supplier will be an Special-Invitee.

10. The HDMC shall be responsible for ensuring the supply of hygienic and balanced diet to the patients and for close monitoring of its quality. The dietary department, working directly under the control and direction of the Resident Medical Officer / Hospital Superintendent, shall ensure appropriate dietary adjustment to patients with diabetes, hypertension, nutritional deficiencies, and similar diseases and shall provide appropriate dietary advice to all patients at the time of discharge from the hospital. In hospitals without a separate department for diet, one of the senior doctors or nurses with knowledge of nutrition and diet shall be assigned the responsibility for ensuring balanced diet supply to inpatients.

### **SPECIAL DIET FOR MOTHER AND CHILDREN**

11. In case of pregnant mothers admitted for delivery will receive diet along with one attendant for a period of three days in case of normal delivery and seven days in case of a caesarean section. In case of children below five years, diet will be provided to the patient and one attendant for the entire duration of hospitalisation. In case of PHCs located in remote and interior areas where diet service providers are not available, a cheque should be issued for an amount equivalent to the cost of providing diet to the patient and the attendant. The Special diet for malnourished children shall be provided as mentioned in the annexure. The entire cost in this regard shall be met from NRHM grant.

12. The Superintendent of all hospitals in the state are instructed to follow the terms and conditions summarised below while providing wholesome diet to the patients admitted in the hospital:

- a) The food items shall be prepared and supplied in accordance with the diet prescribed in the annexure to this Order. The diet prescribed in this order may be improved in quality and content by the DDMC / hospital superintendent / Diet Provider without however diluting the protein and calorie content.
- b) All food materials should be high quality and should be inspected and certified by the HDMC before cooking. Similarly, one of the members of HDMC should taste the diet before it is supplied to the patients every time.
- c) All condiments and cooking medium used should be procured in sealed and branded packets/ tins/ containers and conform to *Agmark* Grade 11. Only IR 36 grade or superior rice should be used.
- d) Vegetables and fruits supplied should be purchased fresh and stored appropriately in refrigerators procured by the contractor at his own cost. A different vegetable should be cooked on each day of the week. No vegetable (except potatoes) is to be repeated on any day of the same week.
- e) All raw food materials should be thoroughly cleaned in hot clean water prior to cooking. All vegetables should be washed prior to dicing. Potatoes should be fully peeled before cooking. Only pasteurized, homogenized, double toned milk should be supplied in sealed pouches to the patients.
- f) Food should conform to the standards prescribed by the Food Safety Act and Prevention of Food Adulteration Act and Rules. Any food materials not confirming to these standards shall be condemned and disposed forthwith under proper panchanama and record and immediate action shall be initiated against the contractor for violation of conditions of contract.

- g) The time and place of diet distribution should be prescribed by the hospital superintendent. The cooked food is to be taken to the wards in covered trolleys in a hygienic manner ensuring that no contamination occurs during transport. The food at the time of supply should be hot and palatable. The trolleys shall be supplied by the contractors.
  - h) The contractor shall provide all utensils for appropriate storage of raw materials, cooking, carrying, distributing and serving of cooked food. The quality of the utensils shall be approved by the HDMC.
  - i) The contractor shall be responsible for procurement and maintenance of the food trolleys, utensils, cooking implements and cooking ranges/ovens, etc.
  - j) The head of the hospital shall ensure that all persons associated with cleaning, cooking,, transporting and serving food are screened once every quarter for any disease, including gastro-intestinal infections, and treated appropriately at the cost of the hospital. All persons employed by the diet service provider shall be trained in good hygiene and health practices by the Dietician / Food Inspector. The Director of IPM shall coordinate such training.
  - k) The Dietician / Food Inspector shall have the principal responsibility for the quality and adequacy of food supplied to the patients. The Commissioner of Health and Family Welfare shall ensure that all Dieticians are given refresher training once a year at National Institute of Nutrition duly meeting the training costs from the NRHM Mission Flexipool.
  - l) The hospital authorities shall provide adequate space, including potable water, electricity, washing and cleaning space with good drainage, within the hospital premises for the preparation, storage and serving of food. However, the cost of electricity, water and other consumables shall be paid by the contractor.
  - m) The staff nurse in charge of the ward should maintain Diet Supply Register (DSR) duly recording the name of the patient, time of supply diet supply and the satisfaction level of the patient with the diet supplied. The DSR shall be the basis for payment of diet charges to the Diet Service Provider (DSP). Diet charges shall be paid every month to the DSP by the Superintendent. All payments shall be made through cheque / wire transfer.
  - n) The contractor shall be imposed a penalty of ten per cent from the overall payment for failure to adhere to any of the conditions stipulated above. Violation of terms and conditions of the contract twice shall result in summary termination of the contract.
13. The Commissioner of Health and Family Welfare, Director of Medical Education, Commissioner of APVVP, Director of Public Health, Commissioner of AYUSH and the District Collectors are instructed to take necessary action accordingly.
14. This order is being issued with the concurrence of Finance (Expr. M&H.I) Department vide their U.O.No.36366/309/A1/Exp. M&H/11, dated: 02.02.2011.

**(BY ORDER AND IN THE NAME OF THE GOVERNOR OF ANDHRA PRADESH)**

**DR P.V. RAMESH  
PRINCIPAL SECRETARY TO GOVERNMENT**

To

The Commissioner of Health and Family Welfare, A.P., Hyderabad.  
The Director of Medical Education, A.P., Hyderabad.  
The Commissioner of APVVP, A.P., Hyderabad.  
The Commissioner of AYUSH, A.P., Hyderabad.  
The Director of Public Health & Family Welfare, A.P., Hyderabad.  
The Managing Director of APMSIDC, A.P., Hyderabad.

The Mission Director NRHM. A.P., Hyderabad.  
The Director of IPM , A.P., Hyderabad.  
All District Collectors.

Copy to:

The Superintendents of all Teaching, District and Area Hospitals in the State.  
All District Medical and Health Officers in the State.  
All District Coordinators of Hospital Services.  
All Senior Public Health Officers .  
The Principal Accountant General of Andhra Pradesh, Hyderabad.  
The Director of Treasuries & Accounts, A.P. Hyderabad.  
The Pay & Accounts Officer, Hyderabad.  
All District Treasury Officers in the State.  
The President, Hospital Diet Canteen Suppliers Welfare Association, Afzalgunj, Hyderabad.  
The PS to Special Chief Secretary to the Chief Minister.  
The OSD to the Minister for Finance..  
The OSD to the Minister for Medical and Health.  
The PS to Prl. Secy. HM&FW Dept.  
The Finance (Expr. M&H.I) Dept.  
The HM&FW (G) Dept.  
Stock File and Spare Copy.

**//Forwarded: by order//**

**SECTION OFFICER**

**ANNEXURE TO THE GOVERNMENT ORDER**  
**ANNEXURE-I**  
**DIET SCHEDULE TO THE PATIENTS**

S.N	Diet Content		
FULL DIET (Rice + Chapathi ) D1			
1	Breakfast		
		Idlis (3-4)	150 – 200 gr
		Sambar and Chutney	100ml
		Bread	Modern/ Good Quality 40g (2 slices)
		Eggs – 2 Sprouts/ Cooked Peas/	50 gm
		OR	
		Upma /Pongal / Kichdi	100g Rawa and 10g black gram dhal + Chutney
		Bread	Modern/ Local good quality 40g (2 slices)
		Eggs – 2 Sprouts/ boiled legumes	50 gm
2	Lunch	Fine rice (Masoori Rice)	200 grams of raw rice (cooked weight approx 600g)
		OR	
		Fine rice and wheat Pulkas	100gm raw rice (cooked weight approx 300gm) and 4 pulkas of not less than six inch diameter
		OR	
		Pulakas	8 wheat Pulkas, each not less than six inch diameter (with 200g wheat flour of good quality)
		Sambar	150ml.(prepared with 25g of red gram dhal)
		Vegetable Curry	150g. (1 cup cooked)
		One boiled Egg and Curd	One Egg and 100 grams of Curd
3	Dinner	Fine Rice /Pulkas	150g raw rice (cooked weight approx 450g) and two pulkas of not less than six inch diameter
		OR	
		Pulkas	Six Pulkas (150g. of wheat flour of good quality) of not less than six each diameter
		Sambar	150ml.(prepared with 25g of red gram dhal
		Vegetable Curry	150g. (1 cup cooked)
		Banana(fresh good quality)	1 No. (100g)
Average Nutritive per Day			
		Calories	2,000
		Protein	60g. (75g. in case of Chapathi diet
		Fat	33g.
Plain Milk Diet (D II)			
1	Breakfast	Milk	200 ml of Toned Milk with 10g Sugar
2	Lunch	Milk	350 ml Milk. with 25g. of sugar
3	Evening	Soups/juices	Tomato soup/ Corn soup/ Coconut water/ Orange juice with or without sugar/ glucose
4	Dinner	Milk	400 ml milk with 25g of sugar

Average Nutritive Per Day			
		Calories	:1200
		Protein	:33g.(75g)
		Fat	:33g.
Bread-Milk Diet (D III)			
1	Breakfast		200 ml Milk with 10g Sugar
2	Lunch	Milk and Bread	200 grams of good quality Bread
			200 ml of Toned Milk with 10g sugar.
3	Dinner		200 grams of good quality Bread & 200 ml of Toned Milk with 10g sugar.
Average Nutritive PerDay			
		Calories	:1549
		Protein	:45g
		Fat	:15g
Sago-Rice Porridge Diet (D IV)			
		08:00 am Sago Payasam	:150ml
		10:00 am Rice Porrige	:150ml
		Vegetable soup	:100ml
		12:00 noon Sago Payasam	:150ml
		02:00 pm. Rice Porridge	:100ml
		Vegetable soup	:100ml
		04:00 pm Banana Shake	:150ml
		06:00 pm. Mixed vegetable soup	:150ml
		08:00Wheat porridge/Vegetable soup/Rice Porridge	:150ml
Average Nutritive PerDay			
		Calories	:2200
		Protein	:25g
		Fat	:10g

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## ANNEXURE-II

### Special Diet for Heart Disease with Hypertension – (SD I)

SN	Timings	Items	Measures
1.	<b>Early Morning</b>	Tea / coffee/	One cup
2.	<b>Breakfast</b>	Phulkas / Paratha / Vada	2 / 1 / 2
		Dhal curry / Potato curry /sambar	3 tbsp / ½ Katori / 1 Katori
		Tea/coffee	One cup
3.	<b>Mid morning</b>	Any fruit	One
4	<b>Lunch</b>	Fine rice	1 katori
		Dhal with any green leafy vegetable	1 katori
		Rasam or vegetable soup	1 katori
		Butter milk	1 katori
		Salad of tomato, onion,carrot	One each
5	<b>Snack</b>	Upma	1Katori
		Tea/coffee	1 cup
6	<b>Dinner</b>	Fine Rice /Pulkas	1 Katori
		Any vegetable curry	1 Katori
		Rasam	1 Katori
		Butter milk	1 Katori
		Salad of carrot, radish,cucumber	1 each
7	<b>Bed time</b>	Any fruit	One
<b>1 Katori: 150 ml, Average Nutritive Value/day : Energy 1000 Kcal, Protein :38 gm, Fat:22 gm</b>			

#### **Dietary advice for Hypertension**

Flesh foods (mutton / chicken) not more than once a week.

Fish 2-3 times a week

Egg yolk to be avoided, but egg white can be taken

Garlic 0.5g, methi seeds 5 gm(one tsp) Methi can be included in various preparations ( phulkas, idlis, sambar, dosa etc)

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## ANNEXURE-III



**Special Diet for Diabetis – (D2)**

<b>S.No</b>	<b>Timings</b>	<b>Items</b>	<b>Measures</b>
1.	<b>Bed Tea</b>	Tea / coffee/	One cup
2.	<b>Breakfast</b>	Toast	One
		Milk	1 Cup
		Orange	One
4	<b>Lunch</b>	Fine rice	1 katori
		Sambar	1 katori
		Amaranth	1 katori
		Butter milk	1 katori
		Tomato	One
		Cucumber	One
5	<b>Evening</b>	Upma	½ Katori
		Tea/coffee	1 cup
6	<b>Dinner</b>	Phulkas	3
		Lentil dhal	3/4 Katori
		Beans curry	1 Katori
		Butter milk	1 Katori
		Tomato	One
		Radish	One
	<b>Note:</b>	Oil to cook	3 tsp
<b>Average Nutritive Value/day :</b>			
<b>Carbohydrates: 244 gm,</b>			
<b>Protein :60 gm,</b>			
<b>Fat:37 gm</b>			
<b>Energy: 1500 Kcal</b>			

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**ANNEXURE-IV**

**Special Diet for Diabetic children – (D3)**

S.No	Timings	Items	Measures
1.	Early Morning	Milk	One cup
2.	Breakfast	Toast	Three
		Milk	1 Cup
		Butter	$\frac{3}{4}$ cup
		Orange	One
4	Lunch	Fine rice	1 katori
		Phulka	Three
		Fenu greek leaves	$\frac{1}{2}$ katori
		Sambar	1 katori
		Butter milk	1 katori
		Tomato	One
		Radish	One
5	Evening	Cucumber sandwich	Two
		Tea/coffee	1 cup
6	Dinner	Phulkas	3
		Rice	1/2 Katori
		Bengal gram dhal	1 katori
		Brinjal curry	1 Katori
		Curd	1 Katori
		Tomato	One
		Cabbage leaves	Two
	Note:	Oil to cook	5 tsp
Average Nutritive Value/day :			
Carbohydrates: 356 gm, Protein :75 gm, Fat:37 gm Calories: 2265			

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**ANNEXURE-V**

**Special Diet for Pregnant Women**

S.No	Timings	Items	Measures
1.	<b>Breakfast</b>	Milk with sugar	1 cup
		Upma	1 Cup
2	<b>Lunch</b>	Fine rice	1 katori
		Phulka	2
		Dal with Green leafy vegetable	½ cup
		Veg curry	½ cup
		Veg salad	7 to 8 slices
		Curd	½ cup
		Sambar	1 cup
		1 Egg	1
3	<b>Evening</b>	Poha/Samosa	1 cup/2 No.
		Tea/coffee	1 cup
4	<b>Dinner</b>	Phulkas	2
		Rice	1 Katori
		Dhal	1 katori
		Vegetable curry	1 Katori
		Curd	1 Katori
		Any seasonal Fruit	One
	<b>Note:</b>	Oil to cook	5 tsp
<b>Average Nutritive Value/day :</b>  <b>Carbohydrates: 356 gm,</b> <b>Protein :65 gm,</b> <b>Iron : 38 gm</b> <b>Calories: 2175</b>			

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**ANNEXURE-VI**

**Special Diet for Malnourished children – (D1)**

**Details of the Diet Schedule fixed by Govt.,**

- 1. Feed child for every two hours: If the Child Is Unable to Take Solid Foods, Give 100 ml Milk for every two hours with 5 to 8 ml of Ground nut oil about two to three days.
- 2. Start giving 300ml to 500ml milk along with solid food as mentioned below.

S.No	Timings	Items	Measures
1.	06 .00 am	Milk with sugar	300 ml
2.	07.30 am	Kichidi	30 gm
3.	10.00 am	Egg/Bread	1 no
4.	12.00 pm	Bajra Kichidi/ Jowar Kichidi	30 gm
5.	03.00 pm	MILK	250 ml
6.	06.00 pm	Rice	40 gm
		Dal	20 gm
7.	08.30 pm	Milk	

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**ANNEXURE-VII**

**SAMPLE MEAL PLAN FOR ADULT WOMAN**

S.No	Timings	Items	Measures
1.	<b>Breakfast</b>	Milk with sugar	1 cup
		Upma	1 Cup
2	<b>Lunch</b>	Fine rice	150 gm
		Phulka	2 no
		Dal with Green leafy vegetable	25 gr
		Veg curry	100 gm
		Veg salad	50 gm
		Curd	100 ml
		Sambar	150 ml
		1 Egg	1
3	<b>Evening</b>	Poha/Samosa	1 cup/2 No.
		Tea/coffee	1 cup
4	<b>Dinner</b>	Phulkas	2 no
		Rice	150 gm
		Dhal	25 gm
		Vegetable curry	150 gm
		Curd	50 ml
		Any seasonal Fruit	One
	<b>Note:</b>	Oil to cook	5 tsp
<b>Average Nutritive Value/day :</b> <b>Protein :50 gm,</b> <b>Iron : 30 mg</b> <b>Calories: 1875</b>			

- For Pregnant women provide extra 300 K cal.
- For TB Patient increase quantity & frequency of diet.
- For Goiter Patient: Avoid cabbage and cauliflower and use iodized salt.
- For “Anemia” Inclusion of Iron rich foods in daily diet & Vitamin C rich foods should be included in the meal for the Iron to be properly absorbed by the body.

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